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Approved for use through 10/31/2002. OMB 0651-0031

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RPTO/SB/21 (08-00)

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/005,473
		Filing Date	November 6, 2001
		First Named Inventor	Kreang-Arekul
		Group Art Unit	2625
		Examiner Name	Choobin, B.
Total Number of Pages in This Submission	7	Attorney Docket Number	021106-000510US

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	1) Return receipt postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	2) PTO/SB/08A and PTO/SB/08B forms
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	3) One (1) Reference
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. Total number of pages <u>does not include cited references</u> .	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm and Individual name	Townsend and Townsend and Crew LLP	Reg No. 43,336
Signature	S.B. Kotwal	
Date	July 21, 2005	

CERTIFICATE OF MAILING

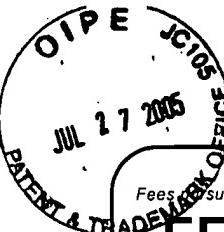
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:

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Typed or printed name	Christopher R. Fitting	<i>Chr. R. Fitting</i>	Date	July 25, 2005
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60541229



Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$180.00)

Complete if Known	
Application Number	10/005,473
Filing Date	November 6, 2001
First Named Inventor	Kreang-Arekul
Examiner Name	Choobin, B.
Art Unit	2625
Attorney Docket No.	021106-000510US

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
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under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-20 or HP =	x	\$	= \$0	_____	_____

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
-3 or HP =	x	\$	= \$0	_____	_____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 = _____ / 50 = _____ (round up to a whole number)	x	_____	= _____

Fees Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

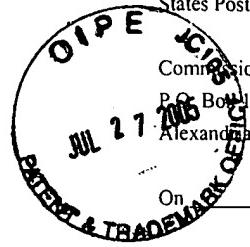
Other: Information Disclosure Statement (after office action)

180.00

SUBMITTED BY

Signature	S. B. Kotwal	Registration No. (Attorney/Agent) 43,336	Telephone (650) 326-2400
Name (Print/Type)	Sujit B. Kotwal		Date July 21, 2005

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TOWNSEND and TOWNSEND and CREW LLP

By: _____

7/25/05

PATENT
Attorney Docket No.: 021106-000510US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

KREANG-AREKUL et al.

Application No.: 10/005,473

Filed: November 6, 2001

For: METHODS AND SYSTEMS FOR
COMBINING A PLURALITY OF
RADIOGRAPHIC IMAGES

Examiner: Choobin, B.

Art Unit: 2625

**SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the non U.S. Patent references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Applicant would like to draw the Examiner's attention to related applications: (1)

U.S. Application No. 11/049,588 filed February 1, 2005 (Attorney Docket No. 021106-

000520US) which is a divisional of the present application; and (2) U.S. Application No. 11/067,594 filed February 25, 2005 (Attorney Docket No. 021106-001810US) which is a continuation-in-part of the present application. The Examiner is requested to consider the prosecution of the above-mentioned applications in the present application.

As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.

Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

S. B. Kotwal

Sujit B. Kotwal
Reg. No. 43,336

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SBK:crf



Substitute for form 1449A/PTO		<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)		Application Number	10/005,473
		Filing Date	November 6, 2001
		First Named Inventor	KREANG-AREKUL
		Art Unit	2625
		Examiner Name	Choobin, B.
Sheet	1	of	2
		Attorney Docket Number	
		021106-000510US	

Examiner Signature		Date Considered	
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¹ EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ² Applicant's unique citation designation number (optional). ³ Kind Codes of U.S. Patent Documents at www.uspto.gov or MPEP 901.04. ⁴ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁵ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁶ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁸ Applicant is to place a check mark here if English language Translation is attached.

Substitute for form 1449B/PTO				<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT				<i>Application Number</i>	10/005,473
				<i>Filing Date</i>	November 6, 2001
				<i>First Named Inventor</i>	KREANG-AREKUL
				<i>Art Unit</i>	2625
				<i>Examiner Name</i>	Choobin, B.
Sheet	2	of	2	<i>Attorney Docket Number</i>	021106-000510US

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional) ² Applicant is to place a check mark here if English language Translation is attached.